

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 12

## BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full)

Edwards For President

ADDRESS (number and street)



Check if different than previously reported

c/o 29 Briarwood Drive

2. IDENTIFICATION NUMBER

C00384073

CITY, STATE, and ZIP CODE

Ringgold

GA

30736

3. IS THIS REPORT FOR :

☐ Primary☒ General4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)☒ April 15 Quarterly Report☐ July 15 Quarterly Report☐ October 15 Quarterly Report☐ January 31 Year End Report

Monthly Report Due On:

☐ February 20☐ March 20☐ April 20☐ May 20☐ June 20☐ July 20☐ August 20☐ September 20☐ October 20☐ November 20☐ December 20☐ January 31☐ Twelfth day report preceding

(Type of Election)

election on 11/02/2004

in the State of

☐ Thirtieth day report following the General Election on

on

IS THIS REPORT AN AMENDMENT



YES



NO

## 5. COVERING PERIOD

FROM

01/01/2006

THROUGH

03/31/2006

## SUMMARY

6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD

942.29

7. TOTAL RECEIPTS THIS PERIOD  
(From Line 22, Column A, Page 2)

0.00

8. SUBTOTAL  
(Lines 6 and 7)

942.29

9. TOTAL DISBURSEMENTS THIS PERIOD  
(From Line 30, Column A, Page 2)

-2905.18

10. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(Subtract Line 9 from 8)

3847.47

11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE  
(Itemize All on Schedule C-P or Schedule D-P)

0.00

12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE  
(Itemize All on Schedule C-P or Schedule D-P)

235987.48

13. EXPENDITURES SUBJECT TO LIMITATION

0.00

NET ELECTION CYCLE-  
TO-DATE  
CONTRIBUTIONS AND  
EXPENDITURES14. NET CONTRIBUTIONS (Other than Loans)  
(Subtract Line 28d, Column B from 17e, Column B, Page 2)

21651403.90

15. NET OPERATING EXPENDITURES  
(Subtract Line 20a, Column B from 23, Column B, Page 2)

19517709.85

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer

Julius Chambers

Date

07/11/2006

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  
All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:

Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**FEC FORM 3P**  
**(01/2001)**

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

2 / 12

(PAGE 2, FEC FORM 3P)

Name of committee (in full)  
**Edwards For President**

Report Covering the Period

From: 01/01/2006

To: 03/31/2006

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	6706458.44
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	21884886.23
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	2000.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		0.00	21886886.23
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	962908.26
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	2470613.53
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	2470613.53
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	1715061.47
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	1715061.47
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	0.00	33741927.93
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	-2905.18	21232771.32
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	6947671.17
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	2847441.10
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	2470613.53
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	2470613.53
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	235482.33
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	235482.33
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	-2905.18	33733979.45
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

3 / 12

**1. NAME OF COMMITTEE (in full)**

Edwards For President

**ADDRESS (number and street)**

c/o 29 Briarwood Drive

**CITY, STATE, and ZIP CODE**

Ringgold

GA 30736

**2. IDENTIFICATION NUMBER**

C00384073

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	1591.61	Nebraska	0.00	16352.60
Alaska	0.00	0.00	Nevada	0.00	8.46
Arizona	0.00	5384.54	New Hampshire	0.00	502847.28
Arkansas	0.00	1132.59	New Jersey	0.00	5019.61
California	0.00	51645.61	New Mexico	0.00	61502.48
Colorado	0.00	530.76	New York	0.00	183347.97
Connecticut	0.00	3670.57	North Carolina	0.00	120103.37
Delaware	0.00	5.15	North Dakota	0.00	121.95
District of Columbia	0.00	16701.42	Ohio	0.00	379598.46
Florida	0.00	3318.84	Oklahoma	0.00	330503.12
Georgia	0.00	384569.94	Oregon	0.00	3065.19
Hawaii	0.00	675.00	Pennsylvania	0.00	8718.71
Idaho	0.00	11.98	Rhode Island	0.00	0.00
Illinois	0.00	34916.29	South Carolina	0.00	900211.49
Indiana	0.00	1099.48	South Dakota	0.00	2244.92
Iowa	0.00	1313622.01	Tennessee	0.00	207805.97
Kansas	0.00	5097.63	Texas	0.00	30659.11
Kentucky	0.00	462.87	Utah	0.00	1125.00
Louisiana	0.00	1028.94	Vermont	0.00	41993.79
Maine	0.00	31639.98	Virginia	0.00	177643.60
Maryland	0.00	7941.40	Washington	0.00	2415.13
Massachusetts	0.00	509679.72	West Virginia	0.00	1130.15
Michigan	0.00	8061.49	Wisconsin	0.00	173050.83
Minnesota	0.00	100268.44	Wyoming	0.00	2.33
Mississippi	0.00	10.96	Puerto Rico	0.00	0.00
Missouri	0.00	107061.09	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>5739599.83</b>

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 4 / 12

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Edwards For President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Synetech Group, Inc

Nature of Debt (Purpose):  
Consulting/Contrib. Proce-  
ssing

Mailing Address 1228 Cedars Ct  
1st Floor

City State ZIP Code  
Charlottesville VA 22901

Outstanding Balance Beginning This Period

7148.94

Transaction ID: SD-4195

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7148.94

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Limbic Systems

Nature of Debt (Purpose):  
Computer Services

Mailing Address 3124 19th Street North

City State ZIP Code  
Arlington VA 22201

Outstanding Balance Beginning This Period

8208.87

Transaction ID: SD-4196

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8208.87

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Axelrod & Associates

Nature of Debt (Purpose):  
Consulting/Media

Mailing Address 730 North Franklin Street  
Suite 404

City State ZIP Code  
Chicago IL 60610

Outstanding Balance Beginning This Period

64593.75

Transaction ID: SD-4197

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

64593.75

1) **SUBTOTALS** This Period This Page (optional).....

79951.56

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 5 / 12

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Edwards For President

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Rowen/Warren Inc.

Nature of Debt (Purpose):  
Consulting/ Communications

Mailing Address 217 Highland Avenue

City State ZIP Code  
Sleepy Hollow NY 10591

Outstanding Balance Beginning This Period

6400.00

Transaction ID: SD-4198

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6400.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
James Andrews and Company

Nature of Debt (Purpose):  
Consulting/Media

Mailing Address 105H West Delaware Place

City State ZIP Code  
Chicago IL 60610

Outstanding Balance Beginning This Period

26469.93

Transaction ID: SD-4199

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26469.93

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ryan Phillips Utrecht & McKinnon

Nature of Debt (Purpose):  
Consulting/Legal
Mailing Address 1133 Connecticut Avenue, NW  
Suite 300
City State ZIP Code  
Washington DC 20036

Outstanding Balance Beginning This Period

113963.37

Transaction ID: SD-4200

Amount Incurred This Period

9202.62

Payment This Period

0.00

Outstanding Balance at Close of This Period

123165.99

1) **SUBTOTALS** This Period This Page (optional).....

156035.92

2) **TOTALS** This Period (last page this line number only).....

235987.48

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 12

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Edwards For President

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 660108

City Dallas State TX Zip Code 75266-0108

Purpose of Disbursement  
Telephone Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-9122

Date of Disbursement

/   /

Amount of Each Disbursement this Period

939.99

## **B. Blue Cross and Blue Shield**

Mailing Address P.O. Box 30071

City Durham State NC Zip Code 27702

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-9123

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1129.05

## **C. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Boulevard

City Roseland State NJ Zip Code 07068

Purpose of Disbursement  
Payroll Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-9124

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2164.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 12

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Edwards For President

<b>A. BB&amp;T</b> Full Name (Last, First, Middle Initial) Mailing Address 1717 King Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23-9132</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6 Amount of Each Disbursement this Period 20.00
<b>B. Matthew Nelson</b> Full Name (Last, First, Middle Initial) Mailing Address 6011 Archstone Way #401 City Alexandria State VA Zip Code 22310 Purpose of Disbursement Printing/Copying Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23-9125</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 71.00
<b>C. Strategy Group</b> Full Name (Last, First, Middle Initial) Mailing Address 1603 Orlington Avenue Suite 1730 City Evanston State IL Zip Code 60201 Purpose of Disbursement Rent/Utilities/ Improvements Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23-9137</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period -285.00 Void Prior Period Payment
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		-194.00
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 12

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Edwards For President

<b>A. Mark Newman</b> Full Name (Last, First, Middle Initial) Mailing Address 2300 Rexwoods Drive City Raleigh State NC Zip Code 27607 Purpose of Disbursement Hotel/Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23-9139</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period -134.43 Void Prior Period Payment
<b>B. Verizon</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Boix 790422 City St. Louis State MO Zip Code 63179 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23-9140</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period -21.97 Void Prior Period Payment
<b>C. Democrats.com</b> Full Name (Last, First, Middle Initial) Mailing Address 22-27 80th Street #31 City Jackson Heights State NY Zip Code 11372 Purpose of Disbursement Consulting/IT Technical Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23-9141</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period -2500.00 Void Prior Period Payment
<b>SUBTOTAL of Disbursements This Page (optional)</b> ..... ▶		<b>-2656.40</b>
<b>TOTAL This Period (last page this line number only)</b> ..... ▶		



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 12

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Edwards For President

A. Full Name (Last, First, Middle Initial)  
Taylor Rental Party Plus

Mailing Address 5626 E. Virginia Beach Blvd

City Norfolk State VA Zip Code 23502

Purpose of Disbursement  
Equipment/Sound/ Staging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23-9142

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	6

Amount of Each Disbursement this Period

-2218.82

Void Prior Period Payment

SUBTOTAL of Disbursements This Page (optional) .....

-2218.82

TOTAL This Period (last page this line number only) .....

-2905.18

Image# 26940227526

Form/Schedule: **SB23**      Void Prior Period Payment  
Transaction ID: **SB23-9137**

Form/Schedule: **SB23**      Void Prior Period Payment  
Transaction ID: **SB23-9139**

**Image# 26940227527**

Form/Schedule: **SB23**      Void Prior Period Payment

Transaction ID: **SB23-9140**

Form/Schedule: **SB23**      Void Prior Period Payment

Transaction ID: **SB23-9141**

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**Image# 26940227528**

Form/Schedule: **SB23**      Void Prior Period Payment

Transaction ID: **SB23-9142**

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